

Exhibit 2

Eastern Mississippi Correctional Facility (EMCF) Report

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Executive Summary

The Mississippi Department of Corrections has chosen to concentrate a large population of seriously mentally ill inmates, many of whom also have serious medical illnesses, at Eastern Mississippi Correctional Facility (EMCF). Providing adequate health care for this high-acuity medically and mentally ill population requires that EMCF have an adequate structure for providing health care services, including health care policies and procedures; adequate numbers and types of staff; staff training; and a quality improvement program designed to identify, study and implement strategies to correct problems. In addition, an adequate health care delivery system requires that the components of a health care system function in an integrated manner.

However, my review of EMCF shows that virtually all EMCF health care systems are broken or dysfunctional, resulting in actual and ongoing risk of harm to patients. These systems include access to care, medication administration, chronic disease management, specialty services and infirmary care. My review of health records shows that medical provider and nursing evaluations are grossly inadequate, and in some cases demonstrate deliberate indifference to the serious medical needs of patients. My findings show that harm is pervasive and includes the following examples:

- A 25 year-old patient with metastatic testicular cancer that did not have timely access to a urologist following an abnormal ultrasound that show testicular mass.
- A 31 year-old patient with a brain tumor who has not received timely CT scan and referral to a neurosurgeon.
- A 64 year-old patient with undiagnosed and untreated diabetes who reports losing his vision and has not received an ophthalmological evaluation and referral to a retinal specialist.
- A 28 year old patient with bilateral glaucoma who was blind in his left eye, and lost vision in his right eye because he did not receive his glaucoma medications.
- A 40 year-old asthma patient sent to the emergency department and/or hospitalized 7 times in 3 months partly due to not receiving his medication.
- A 33 year-old asthma patient hospitalized three times from January to June 2013. The patient also has left eye blindness and blurriness and pain in his right eye and has not received an ophthalmological evaluation.
- A 36 year-old patient diagnosed with early glaucoma in May 2012 who had not received glaucoma medications and as of April 2014 has had no further follow-up.
- A 53 year-old poorly-controlled diabetic with diabetic retinopathy and glaucoma who has not received ophthalmological follow-up or glaucoma medications.
- A 55 year-old patient with subdural hematoma following correctional officer use of force who did not received recommended MRI and neurology follow-up.
- A 70 year-old patient with prostate cancer who did not receive urology follow-up and for whom EMCF providers are unaware of August 2013 bone scan and oncology radiation recommendations.

Two cases warrant particular comment. In the case of a 25 year old with metastatic testicular cancer, the physician was aware of the patient's ultrasound showing a testicular mass, but did not